



Report Title	Corporate Risk: Quarterly Report
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Accountable Director	Marc Thomas, Deputy Chief Executive
Previous committees/groups	Risk and Assurance Group: September and October. Trust Executive Group: 06 November Audit and Risk Committee 12 November People Committee: 10 September, 19 November Quality Committee: 17 October, 21 November Finance and Performance Committee: 22 October, 24 November
Recommended action(s) Approval, Assurance, Information	Assurance
Purpose of the paper	To provide a quarterly update on material changes to corporate risks during the period July to October 2024.
Recommendation(s)	The Board is asked to: 1. Note the assurance report regarding corporate risks. 2. Identify any areas for further investigation and / or assurance.

Executive summary (overview of main points)

Three Key Messages for the Board:

1. The greatest area of corporate risk remains hospital handover.
2. The anticipated high risk relating to industrial action by general practitioners has not yet materialised.
3. Following the recent Board awareness training in cyber security it is recommended that cyber risk is re-assessed to validate the current levels.

Six new corporate risks have been opened:

- Risk 644: Paramedic Urgent Care (Non-qualified) roles (12, moderate risk).
- Risk 632: Restrictive Intervention/ Restraint practices without Training (12, moderate risk).
- Risk 643: Out of Hours GP provider closure of cases referred from IUC (12, moderate risk).
- Risk 656: Cyber Threats (12, moderate risk).
- Risk 652: Commander Training Compliance (12, moderate risk).
- Risk 612: Hospital Handover Monitoring – West (12, moderate risk).

Three risks have reduced in score but remain on the corporate risk register

- Risk 538: Clinical Record Data - 'Process Flows' System (reduced from 16 to 12, moderate risk).
- Risk 599: Safeguarding Referrals to Local Authorities (reduced from 15 to 12)
- Risk 637: Industrial Action by General Practitioners (reduced from 15 to 12, moderate risk).

Six risks have been de-escalated from the corporate risk register.

- Risk 42: Violence Reduction Standard. (reduced from 12 to 9, moderate risk)
- Risk 574: Security Investment (reduced from 15 to 9, moderate risk)
- Risk 456: Phishing Emails (reduced from 12 to 9, moderate risk).
- Risk 457: Denial of Service (reduced from 12 to 9, moderate risk).
- Risk 588: Visas and Immigration (reduced from 12 to 9, moderate risk).
- Risk 639: Employment Checks for Student Paramedics (12 to 9, moderate risk).

Two corporate risks have been closed:

- Risk 546: Radio Recordings
- Risk 527: Resource Provided for the Trust's Management of Serious Incidents

Strategic ambition(s) this supports Provide brief bullet point details of link to Trust strategy	Our Patients	All strategic ambitions
	Our People	
	Our Partners	
	Our Planet and Pounds	
Link with the BAF (board and level 2 committees only)	Include reference number	All BAF strategic risks

Board of Directors (Public)
28 November 2024
Corporate Risk: Quarterly Report

1. PURPOSE

- 1.1 This paper provides assurance regarding developments in corporate risk during the period July to October 2024. The report focuses on:
- Material changes to risks captured in the Corporate Risk Register
 - Areas of emerging risk.
- 1.2 This risk report is prepared as part of the quarterly cycle of risk assurance for the Trust Board, the Board assurance committees, and the Audit and Risk Committee.

2.0 CONTEXT

- 2.1 Risk is inherent in all Trust activities. Risk management is everybody's business. Failure to manage risk well could lead to harm to patients, staff or others, loss or damage to the Trust's reputation and assets, financial loss, and potential for complaints, litigation, and adverse publicity. Effective risk management is essential at all levels and across all activities of the organisation to support safe and high-quality service delivery and pro-active planning for Trust development.
- 2.2 An important element of the Trust's risk management arrangements is regular reporting to governance bodies and management groups, including the Board and its committees, of current corporate risks, changes in corporate risk exposures, and areas of emerging corporate risk.
- 2.3 The Corporate Risk Register is reviewed by the Risk and Assurance Group (RAG) on a monthly basis. It comprises all risks that have a current risk score of **12 or above** (based on the criteria found in the Trust's risk evaluation matrix). The Corporate Risk Register for October 2024 is issued separately as supporting material for this meeting

3.0 KEY MESSAGES FOR THE BOARD

- 3.0.1 Key Message 1: The greatest area of corporate risk concerns hospital handover, as follows:
- Risk 623: Hospital Handover (South) – 25 (high risk)
 - Risk 602: Hospital Handover (North and East) – 25 (high risk)

Persistent and serious handover delays, and the risk exposures associated with these, are not uniformly present across the Trust's footprint and therefore each operational area is now reporting risks associated with their own area separately. Note at 3.1.1 that handover delay in West Yorkshire is assessed as moderate risk (12) rather than high risk, although this has been increased.

Overall, the severity of the risk remains high for the Trust as the impact of handover delays on patients is potentially catastrophic. It is widely recognised that hospital handover is a system concern relating to wider and multi-faceted issues of patient flow, and the Trust is engaged with multiple system partners in work to reduce handover delays.

- 3.02 Key Message 2: The risk relating to the impact of industrial action by general practitioners has yet to materialise at the level first expected. This has been reduced to the status of moderate risk but is retained in the arena of corporate risk management for visibility and attention.
- 3.03 Key Message 3: A new risk relating to cyber threats has been opened. This is currently assessed as a moderate risk (12). Following the recent Board awareness training in cyber security it is recommended that the Trust's next steps on cyber security include a re-assessment of cyber risks to validate the current levels.

3.1 NEW CORPORATE RISKS

3.1.1 Six new corporate risks have been opened:

- Risk 644: Paramedic Urgent Care (non-qualified) roles (12, moderate risk).
- Risk 652: Commander Training Compliance (12, moderate risk).
- Risk 612: West - Hospital Handover Monitoring (12, moderate risk).
- Risk 656: Cyber Threats (12, moderate risk). It is recommended that levels of cyber risk are re-assessed as part of any follow-up work arising from the Board training session on cyber security held on 24 October 2024.
- Risk 632: Restrictive Intervention/ Restraint Practices without Training (12, moderate risk). This risk has been opened on the People Committee risk register. However, although the mitigation actions for this risk (training needs analysis and training delivery) are People issues, at the core of the risk are matters of patient safety and regulatory compliance, so this risk is also being reported to the Quality Committee.
- Risk 643: Out-of-Hours General Practice - Provider Closure of 6/12/24hr Cases Referred from IUC (12, moderate risk). This risk has been opened on the Finance and Performance Committee risk register. However, at the core of this risk aspects of clinical referral and patient safety, so there is a case for moving this risk to be owned by the Quality Committee.

3.1.2 Appendix A presents more detailed information about these risks.

3.2 RISKS REDUCED BUT REMAINING ON THE CORPORATE RISK REGISTER

3.2.1 Three risks have been reduced in score but remain on the Corporate Risk Register:

- Risk 538: Clinical Record Data Loss - 'Process Flows' System (reduced from 16 to 12, moderate risk).
- Risk 599 – Safeguarding Referrals to Local Authorities (reduced from 15 to 12)
- Risk 637: Industrial Action by General Practitioners (reduced from 15 to 12, moderate risk).

3.2.2 **Appendix B** presents more detailed information about the above risks.

3.3 RISKS DE-ESCALATED FROM THE CORPORATE RISK REGISTER

3.3.1 Six risks have been de-escalated from the Corporate Risk Register. These remain open and are managed via local risk registers:

- Risk 42: Violence Reduction Standard. (reduced from 12 to 9, moderate risk)
- Risk 574: Security Investment (reduced from 15 to 9, moderate risk)
- Risk 456: Phishing Emails (reduced from 12 to 9, moderate risk).
- Risk 457: Denial of Service (reduced from 12 to 9, moderate risk).
- Risk 588: Visas and Immigration (reduced from 12 to 9, moderate risk).
- Risk 639: Employment Checks for Student Paramedics (12 to 9, moderate risk).

3.3.2 **Appendix C** presents more detailed information about these risks.

3.4 CLOSED RISKS

3.4.1 Two corporate risks have been closed:

- Risk 546: Radio Recordings
- Risk 527: Resource Provided for the Trust's Management of Serious Incidents

Six corporate Accident and Emergency Operations risks have been closed as single Trust-wide corporate risks and instead recorded as disaggregated risks covering the three operational areas. Some of these risks still meet the threshold of corporate risk and are reported in the Operations risk register (provided as supporting material for this meeting):

- Risk 548: Resilience of Tactical Command Rota
- Risk 35: Hospital Handover Monitoring
- Risk 105: Operational Performance
- 180: A&E Operations Staffing Resource

- 406: Medicines Checks
- 570: Lack of Adherence to Controlled Drug Documentation Requirements

3.4.2 **Appendix D** presents more detailed information about these closed risks

3.5 EMERGING RISKS

3.5.1 The following areas of emerging risk have been identified:

Regulatory Risk: Regulation 12 Notice

As discussed at the meeting of the Quality Committee meeting held on 17 October Patient, harm resulting from long response times presents the Trust with a risk of regulatory action in the form of a Regulation 12 Notice, which would have other regulatory and legal implications for the organisation.

This risk was discussed by the Trust Executive Group at its meeting on 06 November. The prevailing view is that the potential for regulatory and legal action is an additional component of the existing risk relating to operational performance response times. It is not itself a separate risk and on that basis should not be opened as a new risk. Nonetheless it is important to capture the regulatory and legal dimension of response time risk, and the mitigation actions for this risk should include consideration of how the Trust would respond to a Regulation 12 Notice.

4. FINANCIAL IMPLICATIONS

4.1 This report has no direct financial implications. Failure to mitigate some categories of risk can lead to financial penalties. Work required to mitigate some risks may require revenue and / or capital investment.

5. RISK

5.1 Failure to identify and manage strategic risks in a timely and appropriate manner could prevent the Trust from achieving its strategic objectives.

5.2 Failure to identify and manage operational risks in a timely and appropriate manner could prevent service lines and support functions from achieving their objectives.

5.3 Failure to demonstrate suitably robust and effective risk management arrangements could have an adverse impact on the Trust's reputation and could attract regulatory attention.

6. RECOMMENDATIONS

6.1 The Board is asked to:

1. Note the assurance report regarding corporate risks
2. Identify any areas for further investigation and / or assurance.

SUPPORTING INFORMATION

In this report

Appendix A: New Corporate Risks

Appendix B: Risks Reduced in Score but Remaining as Corporate Risks

Appendix C: De-escalated Corporate Risks

Appendix D: Closed Corporate Risks

Circulated for Information

Corporate Risk Register: October 2024

Operations Risk Register: October 2024

David O'Brien

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Risk and Assurance Manager

15 November 2024

APPENDIX A: NEW CORPORATE RISKS

NEW CORPORATE RISK 1			
Reference	644		
Title	Paramedic Urgent Care (Non-qualified) roles		
Committee	Quality Committee		
Directorate	Quality and Professional Standards		
Business Area	Paramedic Practice		
Risk Owner	Mark Millins, Associate Director Paramedic Practice		
BAF Link	2, Provide Access to Appropriate Care		
Context	Non-Qualified Paramedic Urgent Care roles are not required to undertake additional clinical or refresher training. This staff group represents approximately 15% of roles across all CBUs and attends 300-350 patients per month. Regular audits are undertaken by the governance team and are reporting increased learning from this group.		
Opening Score		Current Score	Target Score
12 (Moderate Risk)		12 (Moderate Risk)	4 (Low Risk)
FULL RISK DESCRIPTION			
WHAT	If...	The holders of Paramedic Urgent Care (Non-Qualified) roles do not regularly refresh their clinical skills and knowledge	
	Then...	These staff could attend a patient who requires care outside of their existing capability	
SO WHAT	Resulting in...	Potential patient harm, regulatory action and reputational risk to the Trust.	
WHAT NEXT	Key Mitigation Actions	Ongoing audit of patient care administered by these staff. Further mitigating actions to be determined by the Senior Clinical Team.	

NEW CORPORATE RISK 2		
Reference	652	
Title	Commander Training Compliance	
Committee	People	
Directorate	Operations	
Business Area	Central Services	
Risk Owner	Liz Eastwood, Head of Service Delivery and Quality (Central Services)	
BAF Links	3, Support patient flow across the urgent and emergency care system 5, Develop and maintain effective emergency preparedness, resilience, and response arrangements.	
Context	The Trust currently do not have a system to detail who is command trained and what level of training completed to respond to calls in line with their portfolio. Additionally, the Trust is unable to capture timeframes for renewal resulting in non-compliance.	
Opening Score		Current Score
12 (Moderate Risk)		4 (Low Risk)
FULL RISK DESCRIPTION		
WHAT	If...	YAS do not ensure that commanders are compliant with their training and CPD
	Then...	There may be occasions when commanders are operating at incidents who are not competent of safe to do so
SO WHAT	Resulting in...	Unsafe systems of work for staff and that incident and / or inappropriate command decisions that could lead to patient harm.
WHAT NEXT	Key Mitigation Actions	A review is underway to collate information. Mitigate actions and timescales to be confirmed

NEW CORPORATE RISK 3		
Reference	612	
Title	Hospital Handover - West	
Committee	Finance and Performance	
Directorate	Operations	
Business Area	A&E Operations	
Risk Owner	Rachel Gillott, Director of Partnerships and Operations (West)	
BAF Links	1. Deliver a timely response to patients 3. Support patient flow across the urgent and emergency care system 10. Collaborative, integral, and influential system partner.	
Context	Hospital handover delays throughout Yorkshire can have significant Trust wide impacts. West Yorkshire has seen a recent increase in handover delays, thereby increasing the risk exposures associated with this. Handover delay risk in South Yorkshire and in Humberside and North Yorkshire are currently assessed as '25 'high-risk.	
Opening Score		Current Score
10 (Moderate Risk)		5 (Low Risk)
FULL RISK DESCRIPTION		
WHAT	If...	There are hospital handover delays
	Then...	Ambulance crews will be unavailable to respond to emergency calls
SO WHAT	Resulting in...	Delayed response times to emergency calls with potential for harm to patients
WHAT NEXT	Key Mitigation Actions	Ongoing review of delays and work with external partners. Actions to be determined to prepare for winter pressures.

NEW CORPORATE RISK 4		
Reference	632	
Title	Restrictive Intervention / Restraint Practices Without Training	
Committee	People Committee (but relevant to Quality Committee)	
Directorate	Quality and Professional Standards	
Business Area	Safety	
Risk Owner	Kate Lawrance, Violence Reduction Lead	
BAF Links	4. Quality governance and culture of improvement, safety, and learning. 9. Staff training and development	
Context	Recently there has been an increase in reported incidents relating to inappropriate restraint. This presents potential patient harm and legal implications for staff and the Trust. New national best practice guidance medical intervention restraint has been issued (excludes violence reduction) but this is currently not included in training provided by the Trust.	
Opening Score	Current Score	Target Score
12 (Moderate Risk)	12 (Moderate Risk)	3 (Low Risk)
FULL RISK DESCRIPTION		
WHAT	If...	The Trust fails to implement necessary and proportionate training regarding medical intervention restraint for all required staffing roles.
	Then...	Patients and staff members will be exposed to greater severity of harm
SO WHAT	Resulting in...	Potential increases in reports of physical injuries to patients and staff, increased staffing absence/ retention due to physical and psychological injury and increased financial claims and reputational damage to the Trust.
WHAT NEXT	Key Mitigation Actions	A Training Needs Analysis (TNA) has been undertaken. The training requirement has been discussed by the appropriate Portfolio Governance Board and is to be implemented as part of the Trust's 2025/26 training plan.

NEW CORPORATE RISK 5			
Reference	656		
Title	Cyber Threats		
Committee	Finance and Performance Committee		
Directorate	Chief Executive Directorate		
Business Area	Information and Technology		
Risk Owner	Ola Zahran, Chief Technology Officer		
BAF Links	14. Safe and effective cyber security arrangements.		
Context	New risk to highlight the general impact on the Trust of a cyber security event. This is an overarching risk, and the three most significant individual cyber risks are recorded separately to ensure that appropriate controls and actions are identified for these. These three risks relate to ransomware, email phishing, and denial of service. Individually these are assessed as moderate risks but below the corporate risk threshold.		
Opening Score		Current Score	Target Score
12 (Moderate Risk)		12 (Moderate Risk)	4 (Low Risk)
FULL RISK DESCRIPTION			
WHAT	If...	YAS were to be impacted by a cyber attack	
	Then...	There would be a potential for disruption to service, and/or data breach	
SO WHAT	Resulting in...	Impact to patient safety, failure to meet legal compliance and statutory responsibilities, financial penalties, and reputational damage.	
WHAT NEXT	Key Mitigation Actions	The top three cyber security threats that are likely to impact YAS are ransomware, email phishing, and denial of service. The Trust has ongoing internal and external lines of defence that prevent and monitor potential cyber-attacks with response plans in place should this occur. It is recommended that this risk is re-assessed as part of follow-up work / next steps following the recent Board awareness training session on cyber security.	

NEW CORPORATE RISK 6		
Reference	643	
Title	Out of Hours General Practice: Provider Closure of 6/12/24hr Cases Referred from IUC	
Committee	Finance and Performance Committee (but relevant to Quality Committee)	
Directorate	Operations	
Business Area	A&E Operations	
Risk Owner	Julia Nixon, Associate Chief Operating Officer – Remote Care	
BAF Links	1. Deliver a timely response to patients 2. Provide access to appropriate care	
Context	There have been instances of 6-hour, 12-hour, and 24-hour cases referred by Integrated Urgent Care to a specific provider of out of hours general practice provider being closed with no clinical assessment. A risk has been raised due to potential harm to patients.	
Opening Score		Current Score
12 (Moderate Risk)		6 (Low Risk)
FULL RISK DESCRIPTION		
WHAT	If...	GP Out of Hours Providers are unable to meet the demand generated via NHS 111 and enact safety protocols which close cases without clinical assessment
	Then...	Patients will be at risk of harm if the patient needs are not met
SO WHAT	Resulting in...	Clinical risk to patients, excess calls to IUC, poor patient experience/poor staff wellbeing and clinical behaviour changes to mitigate in real time.
WHAT NEXT	Key Mitigation Actions	Work with the specific out of hours provider to determine gaps and subsequent mitigating actions.

APPENDIX B: CORPORATE RISKS THAT HAVE REDUCED BUT REMAIN ON THE CORPORATE RISK REGISTER

Ref	Title	Area	WHAT	SO WHAT	Change		Rationale	WHAT NEXT	
					From	To			
538	Clinical record data loss - 'process flows' system	Clinical	<p>IF 'process flows' system used to scan and verify patient paper records is not accurately recording/storing data and does not have continued development by the software provider</p> <p>THEN there is a risk of clinical data loss and the recording of incorrect information, and a risk to the security of the data as the software becomes more vulnerable to hacking etc</p>	RESULTING IN significant impact to clinical audit and information governance requirements with the potential of financial and Trust implications	16	12	New contract commenced 1 st September 2024. One of two new hardware and software successfully installed.	Appetite/Target:	5
								Remaining hardware and software to be installed. Upon completion the risk will be closed.	
599	Safeguarding Referrals to Local Authorities	Safeguarding	<p>IF the Safeguarding referrals leaving the organisation do not contain high quality information and correct and detail</p> <p>THEN social care partners will not be able to review and triage them correctly</p>	RESULTING IN patients not getting help promptly and being at risk of further harm or abuse.	15	12	Quality improvements have been made which have reduced the risk	Appetite/Target	4
								Ongoing work required to manage both the quantity and quality of referrals	
637	Industrial action by General Practitioners	Operations	<p>IF General Practitioners across the whole of Yorkshire and Humber take industrial action as planned</p> <p>THEN there will be a potential increase in demand into 999 and IUC, a reduction in alternative pathways, a reduction in direct access to GP's</p>	RESULTING IN patient harm due to delayed call handling, clinical triage and assessment and response as a result of increased demand and reduced alternative pathways	15	12	Trust not experiencing impact as previously suspected. No incidents or near misses of patient harm reported and therefore reduced the likelihood of patient harm.	Appetite/Target	3
								Risk to remain in place as work continues with external partners to identify impact.	

APPENDIX C: RISKS THAT HAVE BEEN DE-ESCALATED FROM THE CORPORATE RISK REGISTER

Ref	Title	Area	WHAT	SO WHAT	Change		Rationale	WHAT NEXT	
					From	To			
42	Violence Reduction Standard.	Safety	IF YAS fails to be compliant according to the Violence Reduction Standard which provides individual key areas of violence reduction work THEN there is a potential for staff to be seriously injured whilst at work	RESULTING IN the potential for physical harm, financial loss, decreasing morale and subsequently wellbeing from an organisational support perspective and organisational reputational risks, which will lead to loss of service provision.	12	9	Violence Prevention Reduction Policy and plan approved, and communications shared across Trust. Increased compliance with the Violence Reduction Standard. (55 out of 56 indicators are compliant)	Appetite/Target	4
574	Security Investment	Security	IF the Trust does not identify adequate resources to implement essential security upgrades by providing a designated security budget, THEN existing security arrangements will become outdated and inadequate	RESULTING IN an impact on staff safety; an increased risk of loss of Trust assets; and an increased likelihood of security breaches.	15	9	Risk re-scoped to reflect not having an up-to-date assessment of security measures within the Trust. Risk downgrade pending full risk assessment alongside estates as refurbishments have implemented newer / better security measures over the last few years.	Appetite/Target	3

Ref	Title	Area	WHAT	SO WHAT	Change		Rationale	WHAT NEXT	
					From	To			
456	Phishing Emails	ICT	IF a member of staff responds to a fraudulent phishing message THEN the Trust will have a data breach, or allow malicious software to be deployed on our infrastructure (such as Ransomware)	RESULTING IN loss of money, loss of intellectual property, damage to reputation, and disruption of operational activities. These effects work together to cause loss of company value, sometimes with irreparable repercussions.	12	9	Overarching 'Cyber Threats' risk recorded to highlight the impact on the Trust in the event of a cyber security event.	Appetite/Target	4
								Ongoing internal and external lines of defence that prevent and monitor potential cyber-attacks with response plans in place should this occur.	
457	Denial of Service	ICT	IF the Trust is subject to a Distributed Denial of Service (DDoS) attack THEN digital services could be disrupted by the infrastructure being overwhelmed with a flood of internet traffic	RESULTING IN possible impact or shutdown to a number of our online services and websites, temporary and possibly permanent loss of web services, financial loss associated with remediation efforts and damage to the Trust's reputation.	12	9	Overarching 'Cyber Threats' risk recorded to highlight the impact on the Trust in the event of a cyber security event.	Appetite/Target	3
								Ongoing internal and external lines of defence that prevent and monitor potential cyber-attacks with response plans in place should this occur.	
588	Visas and Immigration	People and OD	IF the Trust does not have systems and processes in place to robustly manage non-UK residents THEN the Trust could face significant reputation as well as financial penalties	RESULTING in the withdrawal of our UKVI license to be able to sponsor international applicants	12	9	No further breaches have been identified whilst investigating personnel files.	Appetite/Target	3
								An internal audit review regarding international recruitment and onboarding processes has commenced. Further actions identified as part of this will reduce the risk further.	

Ref	Title	Area	WHAT	SO WHAT	Change		Rationale	WHAT NEXT	
					From	To			
639	Employment checks for student paramedics	People and OD	IF the Trust does not comply with the terms of the NHS England contract regarding employment checks for student paramedics THEN the Trust will be in breach of contract	RESULTING in the withdrawal of our permissions to train students, which will reduce our paramedic recruitment pipeline with then implications on patient safety due to gaps in rotas.	12	9	Data sharing agreement now in place with training / education providers. No longer risk to the Trust however remains open pending update from NHSE to ensure all checks meet NHS standards.	Appetite/Target	3
								Determine whether further checks are needed by the Trust. View to close once determined.	

APPENDIX D: CORPORATE RISKS THAT HAVE BEEN CLOSED

Ref	Title	Area	WHAT	SO WHAT	Change		Rationale	WHAT NEXT	
					From	To			
546	Radio Recordings	Remote Care / EOC	IF radio communications are not recorded or are intermittent THEN means we are unable to evidence what has / hasn't happened through audit	RESULTING IN non-compliance with audits and damage to Trust reputation	12	3	Control Room Solutions (CRS) now live and calls can now be accessed. Risk mitigated.	Appetite/Target	3
								Risk closed	
527	Resource provided to Trust management of serious incidents	Quality and Nursing	IF the Trust do not manage existing backlog of serious incidents and continue declaring them at current levels THEN the serious incident team and wider Trust capacity to support the investigations and responses will see further delays	RESULTING IN failure to meet statutory requirements for serious incident management (SIF2015), increased involvement in complaint handling by external bodies therefore risk to reputational damage, financial risk associated with fines and penalties and increased workloads Trust wide. Additionally - delay and backlog hinders the identification of learning further impacting patient safety and impacts on the patient experience for families involved in the process.	12	4	The backlog of serious incidents has been cleared. The workload is now manageable and response to incidents is more timely. Funding has been released to support recruitment of additional staffing resource.	Appetite/Target	4
								Risk closed	